

2d. Improving; still some excitement in the head. Ordered assa-fœtida mixture; cups to head—porter allowed.

3d. Patient delirious, but apparently with the usual form of mania a potu. Ordered opium, gr. iv. to be succeeded by gr. ij. every two hours.

4th. Determination to head, although he had enjoyed a short sleep. Ordered cups to back of the neck and head; calomel, grs. x. to be followed by senna tea. Evening. Medicine operated; less head-ache. R. Opium, grs. v. followed by grs. iv. every two hours.

5th. Took last night twenty grains of opium; no sleep; pulse feeble. Ordered blisters to back of neck; porter and tinct. of hops allowed. Evening. Resume opium, when sleep followed, and recovery took place.

ART. VI. *Account of a Case of Trismatic Tetanus, produced by the Passage of large, rough, and angular pieces of Clay from the Intestinal Canal into the Vagina, and Cured by Tobacco Injections.* By BURLEIGH SMART, M. D. of Kennebunk, Maine. Read before the Medical Society of Maine, at its Semi-annual Meeting at Portland, in January, 1825.

IN March, 1824, I was requested to visit R. S. an unmarried female, aged twenty-two years. On my entrance into her room, I was struck with the view of a pale, ghastly visage—the eyes rolled up, angles of the mouth retracted, nostrils drawn upward, and the cheeks backward, mouth closed—exhibiting altogether an expression of indescribable suffering. She was lying extended on her back, her head and heels only touching the bed, the spine recurvated into an arch of almost a semicircle—her jaws were locked. In about a minute the spasm subsided, and she swallowed with some difficulty, a teaspoonful of oleum terebinthinæ, from which she experienced immediate relief. The dose of oil was repeated in about five minutes, in consequence of a partial return of the *cramp*, as the attendants termed it; which was that violent constriction and pain, darting from the ensiform cartilage to the spine and extensor muscles of the neck.

During the intervals of the *cramp*, as she had but a few slight returns of the trismatic and tetanic spasms, she gave me the following history of her case:—she had been of a feeble constitution from infancy; three years ago her health became impaired, and she was affected with that erratic appetite, called by Goon, *limosis pica*; to

gratify which, she had eaten for a *long time*, and in *large quantities*, magnesia, chalk, and clay; this complaint was attended with a troublesome head-ache, and other marks of derangement of the functions of the digestive organs.

She had menstruated irregularly, and the discharge was deficient in quantity and abnormal in quality. About a year ago, she became affected with sharp pains through the abdominal and uterine regions, accompanied with heavy bearing-down sensations, like parturient contractions of the uterus—swelling and exquisite tenderness of the abdomen—and retention of urine, requiring the repeated use of the catheter. After some weeks' suffering, she was attacked with trismatic tetanus; the trismus continued forty-eight hours, during which time the disease came on in paroxysms; a trait that it has constantly exhibited in every attack.

The resolution of the first trismatic spasm was attributed to the use of prussic acid.

About this time there was a *discharge* of a considerable quantity of *fætid, purulent looking matter, per anum et vaginam*; and after much suffering from this bearing-down sensation, conjoined with a pricking, tearing, or lacerating feeling, an angulated piece of earthy matter, of a light colour, interspersed with white spots, and of a hard and compact texture, was discovered in the vagina and removed.

The second attack of trismus was about a month subsequent to the first, and continued between three and four days, and left her spontaneously. This was also succeeded by a dejection of this earthy matter, which the attending physician had already pronounced to be the product of "gravel of the womb."

The third attack was in September, seven or eight months subsequent to the second. It continued, with intervals of relief from the spasms, about a month.

In the intervals of the attacks of trismatic tetanus, she was not free from any of the concomitant affections, only suffering them in a less degree than seemed necessary to induce the tetanic spasms.

When she came under my care, she had been labouring under alternations of the spasms, and intervals of comparative ease, for about a week, during which time the violence of the spasms had been moderated by the use of laudanum and bleeding, the latter always producing a resolution of the trismatic spasm when carried to the production of incipient deliquium—but the relief was very transitory. I directed her to take a tea-spoonful of the oleum terebinthinæ—ext. cicuta, five grains, and calomel, five grains, alternately, every hour.

Next day no return of the tetanus; freedom from the cramp and pains in the uterine region; a number of copious dejections from the bowels. Used the catheter, and removed some of the earthy matter from the vagina. Intervals of the medicine lengthened.

Two days afterwards I saw the patient; no return of tetanus; ptyalism; catheter used, and more earthy matter extracted from the posterior and superior part of the vagina; the matter was always found occupying the space between the cervix uteri, and the recto-vaginal septum; the projecting part of the cervix uteri being carried forward toward the symphysis pubis, the os uteri was always impervious to the finger, nor could any fissure or opening be detected by the most careful manual examination, though the relative situation and extreme tenderness of the parts were unfavourable to a satisfactory investigation.

The patient continued exempt from any tetanic affection about ten days, the gastric and abdominal pains being rendered tolerable by the free use of ext. cicuta, which, when used in sufficient quantities to relieve the pain, was productive of derangement of the cerebral functions.

During this period, a hard circumscribed tumour in the right hypogastric region, was discovered, occupying a line drawn from the umbilicus to the superior anterior spinous process of the ilium of the corresponding side, exquisitely tender, hard, and inelastic, which was asserted to have been noticed for a long period. She was now directed to keep the bowels open, and to use the turpentine and cicuta pro re nata.

It should be remarked, that every attack of tetanus, succeeded by a dejection of earthy matter, was followed by a copious secretion of milk, and a number of times by the formation of an abscess in the breast.

In a few weeks the patient was able to visit me, a distance of eight miles; but she suffered much abdominal pain, produced by the motion of the carriage.

The second day subsequent to her visit, I was desired to see her; when she informed me by writing, her jaws being locked, that her suffering from excruciating pain had been inexpressibly severe ever since her ride; that she felt a consciousness that her situation was more perilous, and the event more precarious than it had ever yet been; and that this opinion arose from her feelings being so different from any she had ever before experienced; that the abdominal tumour had descended; that she suffered powerful but ineffectual expulsive

pains, and a sensation as if a large body was tearing and forcing its way through a narrow aperture.

The spasm of the jaws was relieved by bleeding, and the same prophylactics used as before. But the latter were unavailing, notwithstanding sufficient quantities of calomel were introduced to excite a smart degree of pyalism.

After bleeding was deemed improper, suppositories containing about twenty grains of pulverized tobacco, with five grains of opium, were directed to be used per anum. The use of the first, in about two hours, was followed by nausea, vomiting, and a solution of the trismatic spasm of forty-eight hours standing. She had before objected to the exhibition of enemata, and she was now averse to the use of suppositories, from the local distress they occasioned; she was therefore desired to use the same remedies, *per vaginam*, which she did a few times with success; but this form soon became ineffectual, but not till she had repeatedly been annoyed by the taste of tobacco in the mouth at every supervention of vomiting subsequent to the introduction of the remedy. A piece of tobacco was afterwards employed in the same way, with a ligature around it, by which it could be easily withdrawn on the accession of the vomiting, and with the same success as the preceding.

The last form also soon proved ineffective. It was now found that the remedies used for the tetanic affection, paralyzed those expulsive efforts by which the dejection of the earthy matter was effected; it was therefore deemed advisable to suffer the disease, as far as was compatible with safety, to take its own course, with the hope that the expulsive efforts would prove adequate to the dejection of the earthy matter, and thereby put a period to the paroxysms, as the descent of that substance was always the exciting cause of the tetanus.

By the use of the forementioned means, the pains and spasms were a little mitigated for a few days, and twice the jaws were opened by the tobacco; once for about twenty minutes, in which time she drank a tumbler of water, another time for about fifteen minutes, during which she was unable to take any thing, by reason of the distressing nausea at the stomach, occasioned by the tobacco.

With the exception of these intervals, the jaws were *uninterruptedly closed eight days and eight nights*, the tetanic spasms harassing her at more or less distant intervals, and the abdominal pains continuing excruciating.

During the first few days, the severity of suffering seemed slightly mitigated by the remedies used, but they all soon lost their effect.

She had now lain eight days without food or drink, save one draught of water, and suffering the most exquisite torture, and the vital powers now appeared rapidly sinking. In this situation it was determined to make one desperate effort to rescue the patient from this terrible disease, thinking with CELSUS, that "*satiush est enim anceps auxilium experiri quam nullam*;" and knowing the powers of tobacco in prostrating the powers of animal life, the conviction forced itself upon my mind, that if I could subdue these powers, it would then be practicable to subdue the disease. It was therefore determined to make a cautious repetition of the exhibition of the tobacco, in small quantities, until some powerful effect was wrought either on the subject or the disease. An infusion of the article was prepared, and a part injected *per anum*, and a part *per vaginam*, and the latter retained by closing the orifice with a cloth.

This double application was repeated once an hour to the third time, when unequivocal evidence of its effects showed itself; the patient became pale and cold; tremor of the extremities; a small feeble pulse; anxiety and oppression at the *præcordia*, with efforts to vomit, soon followed by powerful vomiting, and a gradual opening of the jaws.

This seemed to break the charm, for although she had many slight returns of the trismus, yet not one exceeding a few hours in duration, and this without any tetanus.

Large and repeated dejections of the earthy matter,* now took place in rapid succession, and she gradually recovered from every symptom of tetanus, and has continued exempt to the present time, a period of about five years. She has had no dejections of the earthy material since convalescence from that attack. The tumour in the hypogastric region has also disappeared, with all those distressing pains in that region and in the uterus. Menstruation is more regular and better in quality, but still she is somewhat affected with the *li-mosis pica*, but she abstains from gratifying this appetite. Her ge-

* A specimen of this matter accompanies this communication. It bears a perfect resemblance in all its external and sensible characters to the clay found between the backs of old chimnies, even in the empyreumatic smell that the clay in such situations imparts, from its impregnation with smoke. This peculiar smell of the clay was very perceptible soon after it became dry. Some of the pieces of clay contained minute splinters of wood and straw intermixed. The patient asserted that she had been in the habit of often picking pieces of dried clay out from between the bricks of the chimney, and eating it. The aggregate quantity of this earth, which was evacuated *per vaginam*, is estimated to have measured about two quarts.

neral health is feeble, but she is free from the burden which so long incommoded her by its weight and size.

In this case, the purulent discharge per anum et vaginam, preceding the defection of the earthy matter into the vagina, furnishes a clue to the manner in which this matter arrived there; and the previous habit of the patient in eating earths, and the abdominal tumour, render it probable that an accumulation of these earthy substances took place in some portion of the intestinal canal, forming a sac which eventually became so occluded from the intestinal canal, as to prevent the fæces passing this way, and its weight causing it to descend into the pelvis, where adhesion to the surrounding parts took place, and finally ulceration, by which a passage was formed, through which the earthy matter made its exit into the vagina.

A case of the formation of a sac by the coats of the intestines, and occlusion from the common canal, by taking a large quantity of an amalgam of quicksilver, is reported in some of the early numbers of the Philadelphia Journal of the Medical and Physical Sciences, which bears some resemblance to the manner in which I have supposed the earthy matter to have become occluded from the alimentary canal.

Kennebunk, Maine, March, 1830.

ART. VII. *Observations on the Medical Topography of Callao, with an Account of Disease of the Liver, as it appeared on board of the United States' Frigate Brandywine, during a Cruise in the Pacific Ocean, in the years 1826-7-8-9.* By W. S. W. RUSCHENBERGER, M. D. of Philadelphia, Assistant Surgeon U. S. N.

I SHALL premise the few remarks I have to make on derangement of the hepatic system, with a short account of the climate of the coast of Peru, or rather of that part of it near the capital, where we spent a large portion of our time, and which appeared to be a very active agent in the production of disease.

The harbour of Callao, situated in 12° 2' south latitude, and 7' west longitude from Washington, is a mere open road-stead, defended from the prevailing southerly breezes, that veer from south-east to south-west, by the island of San Lorenzo; it has a south-east and north-west direction, and its highest point is elevated more than five hundred feet above the sea. It is made up of dark reddish co-

loured rocks in a decomposing state, and sand. It is almost always shrouded in vapour, and is entirely barren. This island is resorted to by foreign ships of war for the purpose of refitting, and is the burying place allotted by the Peruvian government to those not of the Catholic faith.

Callao consists of several dirty, unpaved streets, flanked on either side by little huts made of mud and reeds, or "adobes," (sun dried bricks,) and the inmates are not less wretched in appearance than their dwellings. It is defended by three castles. A little to the southward is "Old Callao," which was sunk by an earthquake in 1746, which at the same time severed in two parts the island of San Lorenzo. On a level with the surface are several arches that formed the ceilings or roofs of the churches of the ancient town, and now serve as receptacles for the dead—or rather did so until being filled up,* they could contain no more. Bodies were thrown promiscuously into these pits in the same state in which they may have died, without even stripping off their clothes, and are found here entire in a state of dry preparation. During the siege of the castles in 1825, the bodies of the slain accumulated to such an extent, that vessels in the harbour were compelled to remove to the island, to avoid the effluvia that was wafted to them by these putrefying, or rather drying heaps. For several miles to the northward and southward, the country is low and marshy, but gently rises on the eastern side into the stupendous mountains of the Andes, whose summits are ever hidden in snow. The soil is rich and vegetation luxuriant. The Rimac, a small rivulet, empties into the bay a little to the north of the town. It is not navigable.

The atmosphere of Callao is hazy and damp during a greater part of the year. In mid-summer† the sun shines out in the middle of the day, and the mornings and evenings are cloudy, and sometimes a heavy mist falls. In the winter season these mists prevail, and the air becomes so cool that a fire is comfortable in the extreme parts of the day. The mean temperature of the year may be stated at 67° F. the temperature seldom rising above 83° F. or sinking below 55. The barometer is subject to but slight changes, and is generally stationary on board at about thirty inches. In Lima, distant from Callao about seven miles in a north-east direction, the barometer stands generally at twenty-seven inches and four lines, varying only from two to four lines and without any established order. Baron de Humboldt remarked in 1802, that the barometer was subject to a constant

* In 1825.

† January and February.

flux and reflux in the twenty-four hours.* Similar observations have been subsequently made.

Rain in distinct drops is rare, and it may be said with propriety that it never rains in the valley of Rimac. The dates of thunderstorms are accurately preserved, and it is said that since 1582, only four have occurred. This is one of the most singular phenomena of nature, and I believe the climate of Peru is, in this particular, unique. Various explanations of this fact have been offered, among the best of which is that of Mr. J. F. DANIEL. He very ingeniously supposes that as atmospheric evaporation and precipitation may be regarded as a constant distillation, it might be possible that a condenser existed in the neighbourhood of a place in the form of a mountain, which might determine the stream of vapour to set constantly upon itself, and convert it into rain to the exclusion of the valley over which it might pass.† This seems plausible, for it is a maxim in Peru, “En el estiò cuanto mayor el calor en la costa, tanto mas abundante la lluvia en la sierra”—in the spring, the greater the heat on the coast, the more abundant the rain in the mountains. So it would appear that the rain in the mountains is in a ratio to the evaporation from the Pacific. Dr. UNANUE attributes it to the electrical state of the air, which he supposes to be constantly surcharged with that fluid, and hence there is a strong current towards the mountains which are electrified negatively, and for the same reason thunder and lightning are hardly known in the vallies near the sea, although it is not uncommon to see the electric fluid playing among the peaks of the Cordilleras. May I be permitted to inquire where is the electric generator that is to keep the air in a positive state, while it is constantly attempting to restore the equilibrium, by discharging the superabundant fluid in the Andes, and how is it that the latter keep in a constant negative state, notwithstanding the supply from the atmosphere?

There is a phenomenon observed in this climate which is not satisfactorily accounted for, viz.: that putrefaction does not readily take place in animal substances exposed to the influence of moisture at night, succeeded by heat in the day time, but as I have stated, whole bodies dry into mummies. Is this owing to the rapid evaporation that takes place from the Pacific—thus counterbalancing the effects of heat and moisture—or has the electrical state of the atmosphere

* See *Observaciones sobre el Clima de Lima*, por Doctor Unánue. Madrid. Segunda edicion, 1815.

† See Caldcleugh's *Travels in South America*.

any influence over the putrefactive process? I was disposed to think that the salt deposited at night by the heavy dews might be a sufficient antiseptic, for not unfrequently the soil is covered in the morning with a thin scale, which crackles much like thin ice when trodden on, and possesses a salt taste—and this is particularly the case after the heaviest dews—but as the same phenomenon is observable several miles from the coast, where we would suppose the saline deposition did not reach, though I was unable to ascertain the fact, leads me to wait for a more satisfactory explanation.

The most prevalent diseases are dysenteries, diarrhœas, hepatic affections at different seasons, and intermittents of the tertian form throughout the year. Nor are they exempt from inflammatory and typhoid fevers, and epidemics cannot be considered as rare, though more common since the revolution commenced than under the Spanish dynasty.

Disease of the liver appeared with us in various forms; making its attack sometimes slowly, sometimes suddenly, and at others the organ was seriously affected, before a symptom manifested the existence of morbid action. When it came on slowly, the patient first complained of a severe pain in the right shoulder above the clavicle, describing it sometimes as a heavy weight, and sometimes as of an aching or shooting kind. The tongue was sometimes clean, but usually furred at the root. The skin was generally in a normal state. The pulse was usually small without either much frequency or tension, though it was occasionally hard and somewhat quick. The bowels were generally costive, though the contrary sometimes obtained. The pain in the shoulder seldom lasted twenty-four hours, before there was a sensation of soreness in the right hypochondrium, manifested on pressure or by a deep inspiration. The pulse became fuller, and occasionally the stomach irritable. An aching pain in the side soon followed, accompanied by a sense of weight and fullness. Besides these, there were several other symptoms that did not always attend, viz.: itching and tickling of the glans penis, scalding of the urethra, high-coloured urine, sharp pain under the scapula, sallowness of the skin. Sometimes the pain was in the left shoulder. Sometimes the disease commenced with nausea and vomitings, with chills and flushes, attended by fever, before there was any indication of hepatic disease, and such cases proved most difficult of management.

Not unfrequently it came on suddenly, while the patient was engaged at his ordinary duties, with a lancinating pain under the edges of the ribs of the right side, sometimes so severe as to render respiration extremely painful. The skin being frequently cool and moist,

tongue furred, bowels costive, with a small pulse, which at times was almost imperceptible, and an anxious expression of countenance.

Sometimes suppuration was established in the liver, without any premonitory signs that would lead us to suppose, *à priori*, that such was the fact. A slight cough, with languor and a disposition to sleep, were the only morbid symptoms complained of by the patient, till rigors, with a throbbing pain in the side, declared but too clearly the nature of the case. Three cases of this kind occurred on board of the Brandywine. In the first, there was no pain complained of at any period of the patient's indisposition, and it was not till after he suffered from rigors, that he manifested any uneasiness in the right hypochondrium, from pressure, or on a deep inspiration. The abscess discharged itself into the intestinal canal. The second case commenced with pain, and a sensation of weight in the stomach, furred tongue, full hard pulse, and occasional chills and flushes. After being twice bled, and having his bowels opened with calomel, he complained of pain in the right shoulder, and the succeeding day of pain in the right side and epigastrium. With intervals of several days of entire relief, from the use of cups, blisters, slight mercurial courses, &c. affording at times every prospect of a happy termination, he was under treatment during three months, when suppuration took place. He lived several days after the abscess burst, having severe chills every night. The matter, which was of a leaden colour and very foetid, was discharged by the mouth and per anum. The liver was very much enlarged. In the third case the matter was discharged through the lungs. Some time previous to his death he complained of catarrh, of which he was relieved, and went to his duty. In two days he returned, complaining of pain in the side and shoulder. He was bled, cupped, and blistered. The abscess burst suddenly at night, and he threw up nearly a quart of very foetid, leaden-coloured pus. He said at the time he felt something give way just under the right nipple, where for three weeks previous he had a "tickling pain," which ceased after the evacuation of the matter; also that he had, during the same period a dry cough, but so trifling in his opinion, as not to require attention. He lived for ten days, discharging pus through the lungs, and on the last two days by stool mixed with a bloody serum. Besides these cases, I saw several similar ones on shore, in none of which was there any effort made on the part of nature, towards discharging the matter externally, and if we are to believe Mr. CLARK, cases of this kind rarely occur. "Although," says he, "tumours are often to be seen externally of considerable dimensions, I never knew an instance of their bursting outwardly; and from what

I could learn, I believe an instance of the kind was never known in India.”*

In all these forms, the mind seemed equally to participate. The patient was always despondent, as to the result of his case—gloomy, irritable, and suspicious; in fact, no man is amiable when the function of his liver is deranged in the slightest degree. Nor can we be surprised at this, when we take into consideration the strong sympathies existing between the stomach, the brain, and that organ. The fact of suppuration of the liver following injuries of the brain, can only be explained on this ground, and it has been said that the affection of the mind is the primary disease. There can be no doubt but particular mental affections do produce disorder of many visceral functions, and perhaps the liver suffers from this cause as often as any other organ. Nostalgia may not be an unfrequent cause of deranged hepatic function. In short, these two very important viscera are to each other as two opposed mirrors, the images of one being reflected to the other, it not being material on which the light first impinges to produce the effect.

The first indication in the treatment was to relieve irritation, and to obviate or subdue inflammation. The means employed for this purpose were bleeding, both general and local, blisters, and purging with the mercurial preparations; and where there was congestion, I think I have seen benefit derived from the use of emetics, which equalize the circulation, and determine to the surface. The second was to restore the liver to the exercise of its healthy functions, for which purpose an alterative course of mercury, in the form of blue pill, was resorted to. Where suppuration had taken place, treatment of whatever kind afforded us but slender hopes of a favourable result. Mr. CLARK says that recoveries do sometimes take place when the matter is discharged through the lungs. We are directed to open the abscess so soon as fluctuation is perceptible, as affording the best prospect to the patient. This should be done not by plunging an instrument at once into the abscess, but first cutting down upon the tumour, to ascertain whether adhesions have formed between the peritoneum of the abdominal parietes and that of the liver, which is very frequently not the case, and should it not be found adhering, the case ought to be left to the resources of nature; for should an opening be made, the cavity of the peritoneum would probably receive the pus, and the patient, in consequence, most certainly perish. In the se-

* Observations on the Nature and Cure of Fevers, &c. by Thomas Clark, Surgeon. Edinburgh, 1801, p. 69.

cond case alluded to, an incision was made over the liver after pus had been discharged, with a view to open it, but the peritoneum was not adhering; the wound was converted into an issue, in hopes that adhesions might form from the irritation it created.

With regard to bleeding, I think that patients do not bear the use of the lancet so well in hot as in cold or temperate climates, and Baron LARREY expresses a similar opinion.* The same may perhaps be said as respects purging with active articles—at least the observation will hold good with soldiers and sailors. These latter differ from every other class of society in their manners, their customs, their diet, and even in their exposure to the causes of disease. Intemperance is looked on by them rather as a virtue than a vice, consequently nine-tenths of them are habitual drunkards, and it is well known that such persons will not bear heroic remedies. The quantity of whiskey allowed daily by government is in my opinion, sufficient to destroy the best constitution in a very short period. Whether idle or employed, each man drinks a half pint of this miserable liquor in the twenty-four hours. A gill is taken at meridian, and another at four o'clock, P. M. scarcely allowing the effects of the first draught to subside. Besides this, it is common to give an extra “tot,” as they technically call it, when they have been more than usually exposed. If they must have the half pint, would it not be better to divide it into three or more parts, or make the interval longer, instead of keeping them part of the day in a constant state of excitement, and at night, when exposed to the more probable cause of disease, left without any stimulus; nay, in a state of depression, consequent upon the excitement of the day?

I may here remark, that change of climate affords the only prospect of a radical cure, for so long as the patient is exposed to its effects, so long is he liable to returns of the disease, which eventually terminates in chronic enlargement. Even after this has taken place, a change of climate, with a well-regulated prophylactic plan, very frequently succeeds in restoring the patient to health, though many are doomed, after a residence in hot climates, and particularly in the West and East Indies, to drag out a miserable existence, in spite of all our art has suggested.

The skin is the organ that probably feels the first and immediate influence of hot climates. It soon loses here, in a great degree, its perspiratory function, from constant excitation, and foreigners, in a very short time, observe the difficulty they have in inducing diapho-

* See his *Memoirs and Surgery.*

resis by the usual means, viz. exercise. The skin becomes husky, and loses that soft elastic feel which it commonly possesses. With it, the pilous tissue suffers, and the hair falls out without any evident cause. Next perhaps in order, is the mucous lining of the primæ viæ. Its secretions are altered, and sometimes increased. The mucus of the intestines becomes more attenuated, more of a serous character, and seems incapable of defending the delicate lining membrane of the stomach and bowels from the action of ingesta, which at other times would be innoxious, and hence the prevalence of dysenteries and diarrhœas.

It is not difficult to trace liver disease to the effects of climate through the medium of the skin, if we acknowledge the cutaneo-hepatic sympathy, as pointed out by Dr. Johnson, in his work on hot climates, and which is there made so plain, that it is unnecessary for me to say any thing on the subject. Yet there is another medium by which the liver may take on diseased action. I believe that it appears often as the sequela of dysenteric complaints. I can conceive that inflammation of the mucous membrane of the duodenum may travel along the ductus communis, and so implicate the liver; and I am disposed to account for the increased prevalence of hepatic affections among our crew, after suffering from epidemic dysentery, by referring to this cause. The cases I have alluded to had suffered severely from that disease.

The regulations of the ship prevented post mortem examinations, so that I can say nothing of autopsical appearances.

ART. VIII. *Extirpation of a Cancerous Eye*. By HARVEY LINDSLY, M. D. of Washington, D. C.

ABOUT the 1st of March, 1829, I was consulted by Michael Furman, respecting a disease of his right eye. He informed me that the complaint commenced about three years previously, in the form of a small white speck on the anterior surface of the eye; which, however, did not prevent his attention to his daily occupations, until some time in November, 1828, when it became painful, and began to enlarge with considerable rapidity.

He had consulted several physicians, and by their direction had employed various remedies without any beneficial effect, and in some instances with decided injury. Lunar caustic and astringent lotions were the principal articles made use of.